



The Commonwealth of Massachusetts

City / Town of _____



Application for Standard Permit

FP-006
(Rev. 1.1.2015)

➔ Return completed application to: _____ ➔

Permit Number: _____

City or Town: _____

Date: _____

DIG SAFE NUMBER

Start Date: _____

In accordance with the provisions of M.G.L. Chapter 148, as provided in Section _____ application is hereby made

by _____
(Full Name of Person, Firm or Corporation) (Phone Number)

of _____
(Address: Street or P.O. Box, City or Town, Zip Code)

for permission to (state clearly purpose for which permit is requested) _____

Name of Competent Operator (if applicable) _____ Cert. No. _____

Address of Contractor: _____

Telephone: _____ **Cell #** _____

Email: _____

License #: _____ (if different than Certificate No)

Expiration Date of License or Certificate: _____

Project Cost: \$ _____

Location of Project: _____

Name of Business: _____

Owner Name & Signature: _____

Signature _____ **Date:** _____



*The Commonwealth of Massachusetts
Department of Industrial Accidents
1 Congress Street, Suite 100
Boston, MA 02114-2017
www.mass.gov/dia*

**Workers' Compensation Insurance Affidavit: Builders/Contractors/Electricians/Plumbers.
TO BE FILED WITH THE PERMITTING AUTHORITY.**

Applicant Information

Please Print Legibly

Name (Business/Organization/Individual): _____

Address: _____

City/State/Zip: _____ Phone #: _____

Are you an employer? Check the appropriate box:

1. ☐ I am an employer with _____ employees (full and/or part-time).*
2. ☐ I am a sole proprietor or partnership and have no employees working for me in any capacity. [No workers' comp. insurance required.]
3. ☐ I am a homeowner doing all work myself. [No workers' comp. insurance required.]†
4. ☐ I am a homeowner and will be hiring contractors to conduct all work on my property. I will ensure that all contractors either have workers' compensation insurance or are sole proprietors with no employees.
5. ☐ I am a general contractor and I have hired the sub-contractors listed on the attached sheet. These sub-contractors have employees and have workers' comp. insurance.‡
6. ☐ We are a corporation and its officers have exercised their right of exemption per MGL c. 152, §1(4), and we have no employees. [No workers' comp. insurance required.]

Type of project (required):

7. ☐ New construction
8. ☐ Remodeling
9. ☐ Demolition
10. ☐ Building addition
11. ☐ Electrical repairs or additions
12. ☐ Plumbing repairs or additions
13. ☐ Roof repairs
14. ☐ Other _____

*Any applicant that checks box #1 must also fill out the section below showing their workers' compensation policy information.

†Homeowners who submit this affidavit indicating they are doing all work and then hire outside contractors must submit a new affidavit indicating such.

‡Contractors that check this box must attach an additional sheet showing the name of the sub-contractors and state whether or not those entities have employees. If the sub-contractors have employees, they must provide their workers' comp. policy number.

I am an employer that is providing workers' compensation insurance for my employees. Below is the policy and job site information.

Insurance Company Name: _____

Policy # or Self-ins. Lic. #: _____ Expiration Date: _____

Job Site Address: _____ City/State/Zip: _____

Attach a copy of the workers' compensation policy declaration page (showing the policy number and expiration date).

Failure to secure coverage as required under MGL c. 152, §25A is a criminal violation punishable by a fine up to \$1,500.00 and/or one-year imprisonment, as well as civil penalties in the form of a STOP WORK ORDER and a fine of up to \$250.00 a day against the violator. A copy of this statement may be forwarded to the Office of Investigations of the DIA for insurance coverage verification.

I do hereby certify under the pains and penalties of perjury that the information provided above is true and correct.

Signature: _____ Date: _____

Phone #: _____

Official use only. Do not write in this area, to be completed by city or town official.

City or Town: _____ Permit/License #: _____

Issuing Authority (circle one):

1. Board of Health 2. Building Department 3. City/Town Clerk 4. Electrical Inspector 5. Plumbing Inspector
6. Other _____

Contact Person: _____ Phone #: _____

9.00: continued

901.2.1 Add new subsection:

901.2.1 Document Submittal Process. This process includes three tiers of the minimum document submittal requirements. This process does not preclude the permit applicant from submitting additional documents; for example shop drawings along with the *construction documents* at time of permit application.

1. Tier One, Construction Documents - Prior to issuance of a building permit, *construction documents* for the fire protection system must be submitted in accordance with section 107.1.2 and a building permit obtained prior to the installation of fire protection systems or modifications, alterations, additions or deletions to an existing fire protection system. The *construction documents* shall contain sufficient information to completely describe each of the fire protection system(s) for which a permit is to be issued. The *construction documents* shall include the following:

- a. Each system shall be described in a narrative report, which contains:
 - i. design methodology for the protection of the occupancy and hazards in accordance with this code and applicable NFPA Standards and,
 - ii. sequence of operation of all fire protection systems and operations and,
 - iii. testing criteria to be used for final system acceptance.
 - b. Building and site access for fire-fighting and/or rescue vehicle(s) and personnel.
 - c. Fire hydrant(s) location and water supply information.
 - d. Type/description and design layout of the automatic sprinkler system(s).
 - e. Automatic sprinkler system(s) control equipment location.
 - f. Type/description and design layout of the automatic standpipe system(s).
 - g. Standpipe system hose valve(s) type and location.
 - h. Fire department siamese connection type(s) and location.
 - i. Type/description and design layout of the fire protective signaling system(s).
 - j. Fire protective signaling system(s) control equipment and remote annunciator location.
 - k. Type/description and design layout of the smoke control or exhaust system(s).
 - l. Smoke control or exhaust system(s) control equipment location.
 - m. Building life safety system features (auxiliary functions) required to be integrated as part of the fire protective signaling system(s).
 - n. Type/description and design layout of the fire extinguishing system(s).
 - o. Fire extinguishing system(s) control equipment location.
 - p. Fire protection system(s) equipment room location.
 - q. Fire protection system(s) equipment identification and operation signs.
 - r. Fire protection system(s) alarm/supervisory signal transmission method and location.
 - e. Fire command center location.
 - t. Type/description and location of any emergency alarm system.
 - u. Type/description and location of any alternative fire suppression system or protection.
 - v. Type/description and location of any carbon monoxide protection.
- 2. Tier Two, Shop Drawings** - Prior to installation of fire protection systems, shop drawings, where applicable, shall be submitted to the *building official* and fire official and shall contain, but not be limited to; detailed design layout, equipment specifications, system sequence of operation, and analysis to substantiate the design. Shop drawings shall note the name(s), license number(s) and license expiration date(s) of the contractor(s) installing the fire protection systems.

Exception. For shop drawings of Fire Alarm and Detection Systems *see* section 907.1.2 for applicable requirements.

3. Tier Three, Record Drawings - As built plans shall be provided to the building owner for all fire protection and life safety systems that are sealed as reviewed and approved by the *registered design professional* or legally recognized professional performing Construction Control. Where changes to original shop drawings are minor, a list of as-built changes shall be permitted to be submitted where sealed and reviewed and approved by the *registered design professional* or legally recognized professional performing Construction Control.